

Independent Grants for Learning & Change (IGLC)
Track 2 - Call for Grant Applications (CGA)

Closing Gaps in Knowledge Related to the Management of Patients with Rheumatoid Arthritis

I. Background

The mission of Pfizer Independent Grants for Learning & Change (IGL&C) is to partner with the global healthcare community to improve patient outcomes in areas of mutual interest through support of measurable learning and change strategies. “Independent” means that the projects funded by Pfizer are the full responsibility of the recipient organisation. Pfizer has no influence over any aspect of the projects and only asks for reports about the results and the impact of the projects in order to share them publicly.

Through this CGA we encourage organisations to submit grant requests that, if funded, will support education in a specific disease state, therapeutic area, or broader area of educational need.

When a CGA is issued, it is posted on the IGL&C website (www.pfizer.com/independentgrants) in the [Grants Process section](#) and is sent via e-mail to all registered users in our grants system. Some CGAs may also be posted on the websites of other relevant organisations.

II. Eligibility

Geographic Scope:	<input type="checkbox"/> United States Only <input checked="" type="checkbox"/> International: Europe (priority will be given to projects that focus on multiple centres or countries).
Applicant Eligibility Criteria:	The following may apply: medical, dental, nursing, allied health, and/or pharmacy professional schools; healthcare institutions (both large and small); professional associations and medical societies; and other not-for-profit entities with a mission related to healthcare improvement. Prioritisation will be given to projects engaging professional associations that encompass multiple centres or countries. More information about those organisations eligible to apply directly for a grant can be found at: http://www.pfizer.com/files/IGLC_OrganizationEligibility_effJuly2015.pdf Collaborations within institutions (e.g., between departments and/or inter-professional), as well as between different institutions/organisations/associations, are encouraged. All partners must have a relevant role, and the requesting organisation must have a leadership role.

III. Requirements

Date CGA Issued:	December 16, 2015
Clinical Area:	Rheumatoid Arthritis
Specific Area of Interest for this CGA:	<p>It is our intent to support projects that focus on addressing knowledge gaps related to the optimal management and treatment of rheumatoid arthritis (RA). Projects should be focused on targeting the entire care team who currently care for patients with RA. Programs can be focused on a specific aspect of care such as addressing adherence, patient decision making, or patient-provider communications to name a few. Organisations are encouraged to suggest other areas of focus that are directly applicable to the care of RA patients and other topics will be considered.</p> <p>The intent of this CGA is to encourage rheumatology organisations to submit applications for educational grants to provide programing targeted to healthcare providers caring for patients with rheumatoid arthritis. While programs do not need to be certified for continuing education credit, all programs must be independent in nature.</p> <p>More information on principals of learning and behaviour change for health professionals can be found at www.pfizer.com/files/HealthProfessionalsLearningandBehaviorChange_AFewPrinciples.pdf.</p>
Expected Approximate Monetary Range of Grant Applications:	<p>Individual projects requesting up to \$200,000 will be considered. The total available budget related to this CGA is \$600,000.</p> <p>The grant amount Pfizer will be prepared to fund will depend upon the evaluation of the proposal and costs involved and will be stated clearly in the approval notification.</p>
Key Dates:	<p>CGA release date: December 16, 2015</p> <p>Grant application due date: February 19, 2016 Please note the deadline is midnight Eastern Time (New York, GMT -5).</p> <p>Anticipated Grant Award Notification Date: May 2, 2016</p> <p>Grants distributed following execution of fully signed Letter of Agreement</p> <p>Period of Performance: beginning June 30, 2016 or after.</p>

<p>How to Submit:</p>	<p>Please go to the website at www.pfizer.com/independentgrants and click on the button “Go to the Grant System.” Registered users should select the appropriate link under Track 2 – Knowledge Gap</p> <p>If this is your first time visiting this site you will be prompted to take the Eligibility Quiz to determine the type of support you are seeking. Please ensure you identify yourself as a first-time user.</p> <p>Select the following Educational Area: CGA- EU—Closing Knowledge Gaps in RA</p> <p>Requirements for submission: Complete all required sections of the online application and upload the completed CGA template (see Appendix).</p> <p>If you encounter any technical difficulties with the website, please click the “Need Support?” link at the bottom of the page</p>
<p>Questions:</p>	<p>If you have questions regarding this CGA, please direct them in writing to, Amanda Solis at (amanda.solis@pfizer.com), with the subject line “Closing Knowledge Gaps in RA.”</p>
<p>Mechanism by which Applicants will be Notified:</p>	<p>All applicants will be notified via email by the dates noted above.</p> <p>Applicants may be asked for additional clarification or to make a summary presentation during the review period.</p>

References:

1. Cutolo M, Kita GD, van Riel P L.C.M. (2014) Burden of disease in treated rheumatoid arthritis patients:Going beyond the joint. *Seminars in Arthritis and Rheumatism* 43:479-488. Available at: <http://rheumatoidarthritis.semarthritisrheumatism.com/Content/PDFs/Burden-of-disease.pdf>
2. Michaud K, Wolfe F (2007) Comorbidities in rheumatoid arthritis. *Best Pract Res Clin Rheumatol* 21(5):885–906. Available at: http://download.springer.com.proxy1.athensams.net/static/pdf/696/art%253A10.1007%252Fs00296-014-3196-7.pdf?auth66=1426613427_909276ca05f70e59313aa3cceb25776c&ext=.pdf. Accessed March 23, 2015.
3. Dougados M, Soubrier M, Antuneza A, Balint P, et al. (2014) Prevalence of comorbidities in Rheumatoid Arthritis and evaluation of their monitoring: results of an international, cross-sectional study (COMORA). *Ann Rheum Dis* 73:62-68. Available at <http://ard.bmj.com.proxy1.athensams.net/content/73/1/62.full.pdf+html>, accessed March 30, 2015.
4. Loza E, Lajas C, Adreau JL, Balsa A, et al (2015) Consensus statement on a framework for the management of comorbidity and extra-articular manifestations in rheumatoid arthritis. *Rheumatol Int* 35:445-458. Available at: http://download.springer.com.proxy1.athensams.net/static/pdf/696/art%253A10.1007%252Fs00296-014-3196-7.pdf?auth66=1427142869_3c0e4a1a642817833d4e8c70012f6249&ext=.pdf. Accessed March 23, 2015.
5. <http://www.cdc.gov/arthritis/basics/rheumatoid.htm>

IV. Terms and Conditions

1. This CGA does not commit Pfizer or its partners to award a grant or a grant of any particular size if one is awarded, nor to pay any costs incurred in the preparation of a response to this request.

2. Pfizer reserves the right to accept or reject any or all applications received as a result of this request, or to cancel this CGA in part or in its entirety, if it determines it is in the best interest of Pfizer to do so.
3. For compliance reasons and in fairness to all applicants, all communications about the CGA must come exclusively to Pfizer IGL&C. Failure to comply will disqualify applicants.
4. Consistent with its commitment to openness and transparency, Pfizer reports education grants provided to medical, scientific, and patient organisations in the United States. Pfizer reserves the right to announce the details of successful grant application(s) by whatever means insures transparency, such as on the Pfizer website, in presentations, and/or in other public media.
5. Pfizer reserves the right to share with organisations that may be interested in contacting you for further information (e.g., possible collaborations) the title of your proposed project and the name, address, telephone number, and e-mail address of the applicant from the requesting organisation.
6. To comply with 42 U.S.C. § 1320a-7h and 42 C.F.R. §§ 403.900-.914 (the Sunshine Act), Provider (sponsor) must provide to Pfizer specific information for the U.S.-licensed physicians and U.S. teaching hospitals (“Covered Recipients,” as defined by applicable law) to whom Provider (sponsor) furnished payments or other transfers of value from the original independent grant awarded by Pfizer. Those payments or transfers-of-value include compensation, reimbursement for expenses, and meals provided to faculty (planners, speakers, investigators, project leads, etc.) and “items of value” (items that possess a discernible value on the open market, such as textbooks) provided to faculty and participants, if those faculty and/or participants meet the definition of Covered Recipient. Provider (sponsor) must submit the required information during the reconciliation process or earlier, upon Pfizer’s request, so Pfizer can meet Sunshine Act reporting commitments. Be advised that Pfizer will not make any payments to any individuals; grant funding shall be paid directly to Provider (sponsor).
7. No portion of a Pfizer independent grant may be used for food and/or beverages for learners and/or participants in any capacity. Provider (sponsor) will be required to certify during the reconciliation process and/or the periodic collection of Sunshine reporting that funds were not used for food and/or beverages for learners and/or participants.
8. In the performance of all activities related to an independent grant, the Provider (sponsor) and all participants must comply with all applicable Global Trade Control Laws. “Global Trade Control Laws” include, but are not limited to, U.S. Export Administration Regulations; the International Traffic in Arms Regulations; EU export controls on dual-use goods and technology; Financial Sanctions Laws and Restrictive Measures imposed within the framework of the CFSP - Treaty on European Union; and the economic sanctions rules and regulations administered by the U.S. Treasury Department's Office of Foreign Assets Control.

Appendix: CGA Grant Submission Template

Grant Applications should be single-spaced using Calibri 12-point font and 1-inch margins. Note there is a **15-page limit** exclusive of references. Please include the following:

- A. Title
- B. Organisational Detail: Describe the attributes of the institutions/organisations that will support and facilitate the execution of the project, the leadership of the proposed project, and the specific role of each partner in the proposed project.
- C. Goal: Briefly state the overall goal of the project.
- D. Objectives: List the objectives you plan to meet with your project, in terms of learning and expected outcomes.
- E. Assessment of Need: Include a quantitative baseline data summary, initial metrics, or a project starting point (please cite data on gap analyses or relevant patient-level data that informs the stated objectives) in your target area.
- F. Target Learner Audience: Describe the primary audience(s) targeted for this project. Indicate whom you believe will directly benefit from the project outcomes. Describe the overall population size as well as the size of your sample population.
- G. Project Design and Methods: Describe the planned project, the educational approach, and the way the planned methods address the established need.
- H. Innovation: Explain what measures you have taken to assure that this project idea is original and does not duplicate other projects or materials already developed. Describe how this project builds upon existing work, pilot projects, or ongoing projects developed either by your institution or other institutions related to this project.
- I. Outcomes Evaluation: In terms of the metrics used for the needs assessment, describe how you will determine if the gap was addressed for the target group. Identify the sources of data you anticipate using to make the determination. Describe how you expect to collect and analyse the data. Explain the method used to control for other factors outside this project (e.g., use of a control group or comparison with baseline data). Quantify the amount of change expected from this project in terms of your target audience. Describe how you will determine if the target audience was fully engaged in the project.
- J. Dissemination Plan: Describe how the project may have extended benefit beyond the grant. Will the teaching materials be made available to others to use? Will there be tools or resources that are made publicly available beyond the initial project. Describe how the project outcomes might be broadly disseminated.
- K. Timeline
- L. Additional Information: If there is any additional information you feel Pfizer should be aware of concerning the importance of this project, please summarise it in within the page limitations.
- M. References (outside the 15-page limit)
 - There is no designated format for references
- N. Budget (See template available in application)
 - While estimating your budget please keep the following items in mind:
 - Grants awarded by IGLC cannot be used to purchase therapeutic agents (prescription or non-prescription).
 - Pfizer maintains a company-wide, maximum allowed overhead rate of 28% for projects.
 - A separate Excel file should be uploaded. This does not count toward the page limit.
 - An example of the budget template can be found here:
<http://cybergrants.com/pfizer/docs/KnowledgeGapBudgetTemplate2015.xls>

- At the conclusion of your program, a reconciliation of expenses is required using the original budget file submitted.
- O. Letter(s) of Commitment (no page limit):
- Letter(s) must be provided from all organisations listed in section F documenting their support and commitment to the project. Letters should be issued from an institutional authority or authorities and collaborators guaranteeing access, resources and personnel (as the case may be) for proposed project.

Grant Applications should be single-spaced using Calibri 12-point font and 1-inch margins. There is a **15-page limit** exclusive of references. If extensive, references may be included on 1-2 additional pages.